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APPLICANTS

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** CONTINUING DATA **
 This appln claims benefit of 60/462,090 04/10/2003
 NONE

** FOREIGN APPLICATIONS **

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/24/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 7
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 20995
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TITLE
 Imidazole derivatives for treatment of allergic and hyperproliferative disorders

FILING FEE RECEIVED 730	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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